Executive Summary Accreditation Report



Covenant Health

Accredited - O

Covenant Health has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement.

Covenant Health is participating in the Accreditation Canada Qmentum accreditation program. Qmentum helps organizations strengthen their quality improvement efforts by identifying what they are doing well and where improvements are needed.

Organizations that become accredited with Accreditation Canada do so as a mark of pride and as a way to create a strong and sustainable culture of quality and safety.

Accreditation Canada commends **Covenant Health** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

Covenant Health (2016)

Covenant Health is Canada's largest Catholic health care organization with over 14,000 physicians, employees and volunteers serving in 12 communities across Alberta. A major provider in Alberta's integrated health system, Covenant Health works with Alberta Health Services and community partners to create vibrant communities of health and healing through a broad range of programs and services including acute care, continuing care, assisted living, hospice, rehabilitation and respite care.

Accreditation Canada

We are independent, not-for-profit, and 100 percent Canadian. For more than 55 years, we have set national standards and shared leading practices from around the globe so we can continue to raise the bar for health quality.

As the leader in Canadian health care accreditation, we accredit more than 1,100 health care and social services organizations in Canada and around the world.

Accreditation Canada is accredited by the International Society for Quality in Health Care (ISQua) www.isqua.org, a tangible demonstration that our programs meet international standards.

Find out more about what we do at www.accreditation.ca.

Demonstrating a commitment to quality and safety

Accreditation is an ongoing process of evaluating and recognizing a program or service as meeting established standards. It is a powerful tool for quality improvement. As a roadmap to quality, Accreditation Canada's Qmentum accreditation program provides evidence-informed standards, tools, resources, and guidance to health care and social services organizations on their journey to excellence.

As part of the program, most organizations conduct an extensive self-assessment to determine the extent to which they are meeting the Accreditation Canada standards and make changes to areas that need improvement. Every four years, Accreditation Canada surveyors, who are health care professionals from accredited organizations, visit the organization and conduct an on-site survey. After the survey, an accreditation decision is issued and the ongoing cycle of assessment and improvement continues.

This Executive Summary highlights some of the key achievements, strengths, and opportunities for improvement that were identified during the on-site survey at the organization. Detailed results are found in the organization's Accreditation Report.

On-site survey dates

October 3, 2016 to October 7, 2016

Locations surveyed

- 6 locations were assessed by the surveyor team during the on-site survey. Locations and sites visited were identified by considering risk factors such as the complexity of the organization, the scope of services at various sites, high or low volume sites, patient flow, geographical location, issues or concerns that may have arisen during the accreditation cycle, and results from previous on-site surveys. As a rule, sites that were not surveyed during one accreditation cycle become priorities for survey in the next.
- All sites and services are deemed Accredited with Exemplary Standing as of the date of this
 report.

See **Appendix A** for a list of the locations that were surveyed.

Standards used in the assessment

• 4 sets of standards were used in the assessment.

Summary of surveyor team observations

These surveyor observations appear in both the Executive Summary and the Accreditation Report.

During the on-site survey, the surveyor team undertook a number of activities to determine the extent to which the organization met the accreditation program requirements. They observed the care that was provided; talked to staff, clients, families and others; reviewed documents and files; and recorded the results.

This process, known as a tracer, helped the surveyors follow a client's path through the organization. It gives them a clear picture of how service is delivered at any given point in the process.

The following is a summary of the surveyor team's overall observations.

The Leadership and staff live their values in all that they do. Many staff have been with the organization for a long time. They are proud to work for Covenant Health and feel supported by the organization. They have the patient and family at the centre of care. All aspects of care are open to include the patient and family. Quality improvement is a key component in their everyday work such as their delirium program in Intensive Care. Staff spoke positively about the importance of improvement. The physicians are engaged and spoke positively about being part of the organization.

Clinical documentation is well done across the organization. It is standardized and complete. Of particular note is medication reconciliation. Many Quality/Leadership teams were established for the purposes of accreditation. The organization is encouraged to keep these teams in place.

While they have a good partnership with Alberta Health Services and the Edmonton Zone, it can be challenging at times. They have yet to receive their budget for 2016, which challenges their ability to move forward on some key initiatives.

Some of the departments have an aging infrastructure which compromises privacy and confidentiality. Their community and population are continuing to grow and they will need to prioritize their work based on safety and risk. A significant issue is the number of admitted patients in the emergency department of the Edmonton hospitals. Admitted mental health patients spend long periods of time in the emergency department.

Overview: Quality dimensions results

Accreditation Canada uses eight dimensions that all play a part in providing safe, high quality health care.

These dimensions are the basis for the standards, and each criteria in the standards is tied to one of the quality dimensions.

The quality dimensions are:

Accessibility: Give me timely and equitable services

Appropriateness:
Do the right thing to achieve the best results

Client-centred Services: Partner with me and my family in our care

Continuity of Services: Coordinate my care across the continuum

Refficiency: Make the best use of resources

Population Focus: Work with my community to anticipate and meet our needs

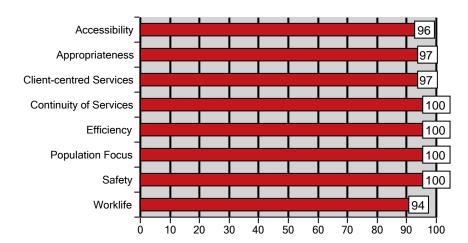
Safety: Keep me safe

Morklife: Take care of those who take care of me

Taken together, the dimensions create a picture of what a high quality health care program or service "looks like." It is easy to access, focused on the client or patient, safe, efficient, effective, coordinated, reflective of community needs, and supportive of wellness and worklife balance.

This chart shows the percentage of criteria that the organization met for each quality dimension.

Quality Dimensions: Percentage of criteria met



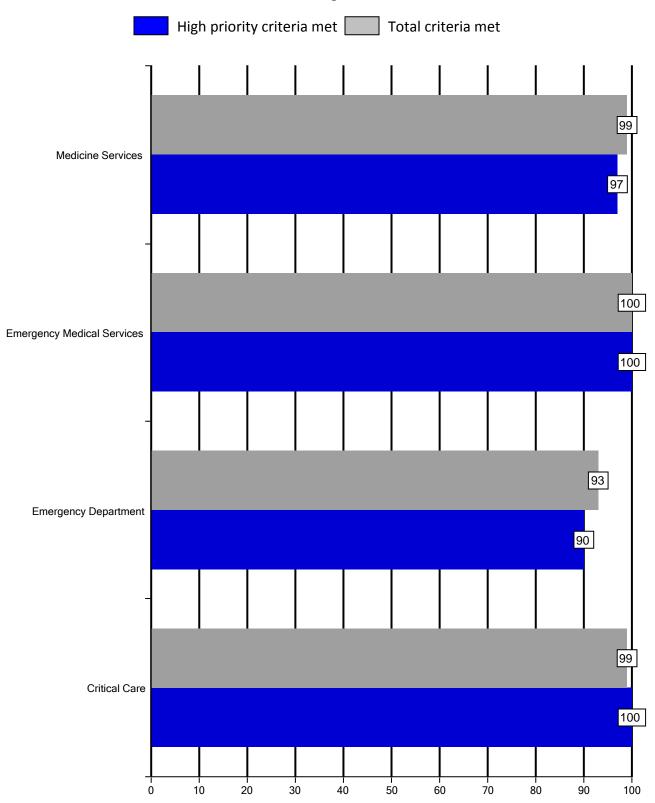
Overview: Standards results

All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

Some criteria—specifically those related to safety, ethics, risk management, or quality improvement—are considered high priority and carry more weight in determining the accreditation decision.

This chart shows the percentage of high priority criteria and the percentage of all criteria that the organization met in each set of standards.

Standards: Percentage of criteria met



Overview: Required Organizational Practices results

Accreditation Canada defines a Required Organizational Practice (ROP) as an essential practice that must be in place for client safety and to minimize risk. ROPs are part of the standards. Each one has detailed tests for compliance that the organization must meet if it is to meet the ROP.

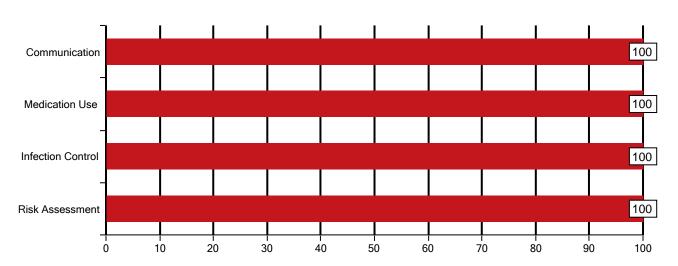
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes how select ROPs are being met across the country.

ROPS are categorized into six safety areas, each with its own goal:

- Safety culture: Create a culture of safety within the organization
- **Communication**: Improve the effectiveness and coordination of communication among care and service providers and with the recipients of care and service across the continuum
- Medication use: Ensure the safe use of high-risk medications
- Worklife/workforce: Create a worklife and physical environment that supports the safe delivery of care and service
- **Infection control**: Reduce the risk of health care-associated infections and their impact across the continuum of care/service
- Risk assessment: Identify safety risks inherent in the client population

See **Appendix B** for a list of the ROPs in each goal area.

ROP Goal Areas: Percentage of tests for compliance met



The quality improvement journey

The Qmentum accreditation program is a four-year cycle of assessment and improvement, where organizations work to meet the standards and raise the quality of their services. Qmentum helps them assess all aspects of their operations, from board and leadership, to care and services, to infrastructure.

The program identifies and rewards quality and innovation. The time and resources an organization invests in accreditation pay off in terms of better care, safer clients, and stronger teamwork. Accreditation also helps organizations be more efficient and gives them structured methods to report on their activities and what they are doing to improve quality.

In the end, all Canadians benefit from safer and higher quality health services as a result of the commitment that so many organizations across the country have made to the accreditation process.

On-site survey Accreditation Report and Decision The organization submits data related Progress review Ongoing to accreditation. education, Self-assessment coaching, The organization • Instrument results and support continues its quality and action plans improvement activities. • Sentinel event summary Mid-cycle consultation Evaluate progress and identify concerns

Qmentum: A four-year cycle of quality improvement

As **Covenant Health** continues its quality improvement journey, it will conduct an in-depth review of the accreditation results and findings. Then a new cycle of improvement will begin as it incorporates any outstanding issues into its overall quality improvement plan, further strengthening its efforts to build a robust and widespread culture of quality and safety within its walls.

Appendix A: Locations surveyed

- 1 Banff Mineral Springs
- 2 Grey Nuns Community Hospital
- 3 Killam Health Centre
- 4 Misericordia Community Hospital
- ⁵ Our Lady of The Rosary Hospital
- 6 St. Joseph's General Hospital

Appendix B

	Required Organizational Practices
Communication	
	Client Identification
	 Information transfer at care transitions
	Medication reconciliation at care transitions
Medication Use	
	High-alert medications
	 Infusion pump safety
	Narcotics safety
Infection Control	
	Hand-hygiene compliance
	 Hand-hygiene education and training
	Reprocessing
Risk Assessment	
	Falls prevention
	Pressure ulcer prevention
	Suicide prevention
	Venous thromboembolism prophylaxis